This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

418/6/ APPLICATION NUMBER:

Total Fee Calculation								
:	Fee Code	Total # Claims	Number Extra	<u>x</u>	Fee	Fee		Total
•	Sm./Lg.				Sm. Entity	Lg. Entity	,	
Basic Filing Fee	201/101	71	<i>i [</i>		·	760	=	760
Total Claims >20	203/103	36 -20 =		x		18	= .	<u> 288</u>
Independent Claims >3	. 202/102	<u>/</u> -3 =	7	x .	*****	78	=	<u>546</u>
Mult. Dep Claim Present	204/104						=	
Surcharge	205/105				· ·	130	=	130
English Translation	139				, c. · · ·	•	•	
TOTAL FEE CALCULA	ATION				4-	••		1724
Fees due upon filing t	he application	:						
Total Filing Fees Due	:= \$	172	<u> </u>		·			
Less Filing Fees Subr	miπed -\$_		- 4					
BALANCE DUE	= \$	1724	/ · :					
Office of Initial Paten	t Examination	\				T. T. T.		
)						

Figure 7

FORM OIPE-RAM-01 (Rev. 12/97)